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PTO/SB/22 (12-04)
Approved for use through 07/31/2006, OMB 0851-0031
1) S. Palent and Trademark Office: U.S. DEPARMENT OF COMMERCE

Under the paperwork Reduction Act of 1995, no persone are requ	uired to respond to a collecti	on of information unless if disp	days a valid OMB control number.
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		P-6101	
Application Number 10/668,725		Filed September 23, 2003	
For FLUSH SYRINGE HAVING ANTI-REFLUX	STOPPER		
Art Unit 3763		Examiner C.S. Will	
This is a request under the provisions of 37 CFR 1.13 application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	5120	S60	s
Two months (37 CFR 1.17(a)(2))	\$450	\$225	s
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	s_1,020.00
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	s
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	s
Applicant claims small entity status. See 37 CFR	1.27.		
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-1666 . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public, Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
,,,			
I am the applicant/inventor.		,	
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
attorney or agent of record. Registration Number 45,172			
attorney or agent under 37 CF	FR 1.34.		
Registration number if ecting und			04 0000
(hanne f. Lukasara		Februa	ary 21, 2006
Signature		201-847-6797	
Jeanne P. Lukasavage Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of report of the critice interest or their representative(s) are required. Submit mustiple forms if more than one			
NOTE: Signatures of all the inventors or assignees of report of the e signature is required, see below.	wille interest or their repress	nomve(s) are required. Summ	n montpe turns it more than one

forms are submitted. L. J. JOHAN W.

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If you need assistance in completing the form, cut 1-800-PTO-9199 and select option 2.

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